Disaster Assistance Handbook

For

Area Agencies on Aging
Adult Day Health Care Centers
and
Multipurpose Senior Services Programs

Prepared By:

California Department of Aging Sacramento, California



California Department of Aging (CDA) Disaster Assistance Handbook

-or

Area Agencies on Aging (AAA)
Adult Day Health Care Centers (ADHC)
And
Multipurpose Senior Services Programs (MSSP)

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INTRODUCTION

The purpose of this handbook is two-fold: 1) to help Area Agencies on Aging (AAAs), Adult Day Health Care Centers (ADHCs) and Multipurpose Senior Services Programs (MSSPs), plan for an effective response to older persons and persons with disabilities in times of disaster; and 2) provide guidance to the AAA, ADHC, and MSSP to report the status of a disaster's impact on seniors and persons with disabilities.

The handbook provides these entities with sufficient information to develop a disaster plan to meet CDA requirements regarding notification and reporting. Disasters generally have their greatest impact on people who because of age, disability, income or language have a harder time preparing for and recovering from such events. The responsibilities for the AAA, ADHC, and MSSP are three-fold:

- 1. Organizations serving older persons have a responsibility to ensure the preparedness of their organization and staff to meet the challenges of a disaster. with disabilities.
- This includes preparing to meet the disaster needs of older persons and persons
 Organizations serving older persons have a responsibility to support the emergency
 management community to ensure that the disaster-related needs of seniors and
 persons with disabilities receive attention in overall community disaster planning.
- Organizations serving older persons have a responsibility to report accurate information concerning the impact of the disaster on seniors and persons with disabilities to CDA.

Authority for Participation

All CDA entities (AAA, ADHC, and MSSP) will organize for disaster work, and will participate in disaster assistance activities on behalf of older persons and persons with disabilities. The citations below contain the authority for operation of the programs in CDA, and in broad terms, require all contractors to plan for emergencies.

1. Older Americans Act

The Administration on Aging (AoA) and the Aging Network composed of State Units on Aging, AAAs and other service providers have a legislative mandate to advocate on behalf of older persons and to work in cooperation with other federal and state programs to provide needed services for older persons. This level of cooperation is particularly relevant in times of disaster. AAAs are expected to participate in disaster assistance activities on behalf of older persons under authority of AoA-PI-76-44, issued September 30, 1976; AoA-TA-77-5, issued March 14, 1977; Older Americans Act Amendments of 1987, Section 310; AoA-PI-79-25, issued September 18, 1979; AoA-PI-84-5, issued February 29, 1984, and Administrative Order 79-1 of the State Office of Emergency Services, issued December 18, 1979.

2. Older Californians Act

It is the intent of the Older Californians Act to ensure the coordination and integration of all services provided to older individuals. To ensure the overall health and welfare of older persons, organizations served by the California Department of Aging should participate in local emergency planning.

3. California Code of Regulations

Title 22, Division 5 (Licensing and Certification of Health Facilities), Chapter 10 (Adult Day Health Centers), Article 4 (Administration), Section 78423, clarifies the requirements of a Disaster Plan for Adult Day Health Care Centers.

4. State of California Emergency Plan

The Plan as prepared by the Governor's Office of Emergency Services (OES), sets forward the mandate (as of May 1998) that all organizations dealing with emergency activities at any level should use California's Standardized Emergency Management System (SEMS) throughout the four phases of a disaster -- mitigation, preparedness, response and recovery.

Given these authorities, this handbook has the following objectives:

- [Section 1] To identify the disaster-related needs of older persons and the critical role in disaster work for community organizations serving older persons.
- [Section 2] To provide an overview of the Standardized Emergency Management System (SEMS) in California, and illustrate procedures for how the AAA, ADHC, and MSSP can obtain resources in disasters and organize an emergency management structure (e.g., the Incident Command System or ICS).
- **[Section 3]** Phase 1 Preparedness To provide an overview of the six disaster planning stages that will guide the AAA, ADHC, and MSSP preparedness for disasters.
- [Section 4] Phase 2 Response To provide guidance on those six initial response actions that AAA, ADHC, and MSSP are called to pursue in the onset of disaster.
- **[Section 5]** Phase 3 Recovery To clarify the role of the AAAs, ADHCs, and MSSPs in the recovery phase of disasters and to identify the scope of recovery services necessary to meet the needs of older persons.
- [Section 6] Phase 4 Mitigation To indicate the mitigation measures that AAAs, ADHCs, and MSSPs can take to reduce the risk of hazards/damage.
- **[Section 7]** To identify the procedures for reimbursement of disaster related expenses.
- [Section 8] Appendices and additional resources for improving preparedness and enhancing the safety and welfare of older persons and persons with disabilities in disasters.

You will notice the following symbol inserted into this document.

This symbol is used when there are tasks or documents that must be completed in order to be in compliance with CDA requirements regarding disaster planning.

Section

The Impact of Disasters on Older Persons and the Organizations that Serve Them

his section outlines some general planning assumptions about disasters for direct service providers and the older persons and persons with disabilities they serve. Given the vulnerability of seniors and persons with disabilities in disasters, organizations serving them play a critical role in ensuring their clients' safe recovery from disasters.

A. Initial Planning Assumptions About Disasters

A disaster is an event that creates an overwhelming disruption occurring on a scale sufficient to require outside assistance. Such an event imperils lives and property. The planning assumptions below are generic enough to be true for almost any disaster scenario. Community-wide or regional disaster threats include earthquakes, floods, wildfires, severe weather conditions, and terrorism, including chemical or biological attacks. More localized or agency specific emergencies include fires, and events such as a local hazardous materials incident.

Given a major disaster, plan for the following:

- Police, fire, paramedics, and 911 responses will be overrun the first three to five days after a major disaster. For example, in a major earthquake -- fires, gas leaks, building collapses, freeway damage, spills, and refinery incidents -- will all require emergency response.
- Utility services may be unavailable for extended periods (i.e., electricity, water, gas, and telephone). Road closures will occur; normal transportation routes will be significantly altered; public transportation may be limited.
 - People will largely be "on their own" in the initial days following a major disaster as
 outside help may be slow in arriving. Moreover, outside help may be unreachable if
 telephone lines are jammed. Your agency may be limited to working only with the
 resources within your immediate neighborhood. In a chemical or biological incident,
 movement may be severely restricted.
 - The organization's work environment will change dramatically. If it is a major disaster, returning to business as usual will be a long and challenging process. The

disaster impact to the community infrastructure will affect the ability of organizations to serve older persons and persons with disabilities after the event.

 Section 3 on Disaster Preparedness provides direct service organizations with steps to build their capacity in response to any of the contingencies previously mentioned. Regardless of the disaster (earthquake, fire, or act of terrorism) the same six planning steps outlined in Section 3 apply.

Moreover, <u>Appendix A - Checklist of Responsibilities (pages 42-44)</u>, lists the concrete tasks that the California Department of Aging requires of AAAs, ADHCs, and MSSPs to ensure their preparedness in responding to the disaster needs of older persons.

For more detail on individual response to specific disaster events (e.g., individual actions to take during a fire, earthquake), <u>Appendix G - Response to Specific Disaster Events (page 54)</u>, provides this information. This includes information from the U.S. Department of Homeland Security about what to do when there are threats of terrorism.

B. Factors That Can Make Some Older Persons More Vulnerable in Disasters

Older persons who face significant challenges in daily living activities during non-disaster times are clearly in even greater jeopardy when disaster strikes. The following are some of the factors that put seniors and persons with disabilities at greater disaster risk versus the general population.

Why are some older persons more vulnerable?

- Reside in High-Risk Areas Older persons living on fixed incomes may live in older housing or in lower income communities. Lower income communities often suffer the greatest physical and structural damage from disaster (especially earthquakes and floods).
- Dependent on Support Services Many older persons require community support services to function independently (home-delivered meals, adult day care, home care assistance, senior centers, etc.). An emergency that disrupts these lifelines leaves them vulnerable.
- No Support Systems Older persons living on very low incomes may not have the resources to prepare for disasters and may not have any type of network to fall back on, or rely on, post-disaster.
- Service Barriers When disaster recovery services (i.e., programs and information) are not accessible or lack cultural and linguistic appropriateness, many seniors and persons with disabilities are unable to access them and therefore have greater difficulty recovering from disasters.

Why community preparedness is important

A lack of community preparedness for older persons carries a huge risk that some individuals may suffer very avoidable health or safety problems in the wake of a

disaster. It may be due to an inability to maintain critical attendant care or life support equipment. It may be due to problems obtaining medication, food, water or shelter. Moreover, it may be due to problems from a disruption to a dependable routine or necessary support system. Finally, it may be due to problems in accessing important disaster recovery services, information or programs.

C. The Important Role for the AAA, ADHC and MSSP in Disaster Work

AAAs, ADHCs, and MSSPs provide direct or contracted services to older persons. These organizations have day-to-day contact and expertise with the needs of older persons and persons with disabilities and, therefore, become a critical component in the recovery of older persons from disasters. These organizations will be the first to identify the unmet needs of older persons. They will also be in the best position to connect services with needs. In short, AAA, ADHC, and MSSP managers serving older persons are vital partners of emergency management personnel in meeting the needs of seniors and persons with disabilities during times of disaster.

The value of the AAAs, ADHCs, and MSSPs to emergency management personnel.

AAAs, ADHCs, MSSPs:

- Act as a conduit for getting disaster information to older persons and conversely getting
 information on the disaster needs of older persons back to emergency officials. In a
 sense AAAs, ADHCs, and MSSPs providing direct services to older persons, form an
 ongoing human service infrastructure.
- Provide critical services at the front line. Those AAAs, ADHCs, and MSSPs that can
 continue and possibly expand services following a disaster will be at the front lines
 providing many of the services necessary to meet the response and recovery needs of
 older persons following disasters.
- Provide language and cultural sensitivity. Given the stress and anxiety created from a
 disaster crisis, AAAs ADHCs, and MSSPs can provide reassurance to the people they
 serve in a manner that is linguistically and culturally appropriate.
- Offer neighborhood connections. AAAs, ADHCs and MSSPs serving older persons and persons with disabilities offer community connections and local community resources that can enhance response and recovery effectiveness within local jurisdictions.
- Have earned community trust. AAAs, ADHCs, and MSSPs maintain daily relationships with ethnic communities and older persons and are trusted by those communities to meet their needs.

A definition of 'Critical Services'

For the purposes of this document, 'critical services' are defined as those services that enable older persons and persons with disabilities to remain safe and independent at home or within the community. This includes, but is not limited to, the following services:

Food or Meal Services

Medical Attention

- Medicine
- Equipment
- Transportation
- Home Care
- Senior Centers

- Adult Day Health Care
- Information and Assistance Services
- Housing
- Health
- Mental Health Services

AAAs, ADHCs, MSSPs that contract with, or have agreements with service providers, must ensure their preparedness and their ability to continue to deliver services post-disaster. The fact that disasters have a greater impact on older persons underscores the need for the agencies that serve them to be viable in the aftermath of disasters. It also underscores the need for the managers of the AAAs, ADHCs, and MSSPs to be catalysts to ensure the training and preparedness of their contractors/vendors and to ensure that contractors understand their respective roles in disaster response. Meal services, information and assistance referral services, attendant care, housing, translation services, and many other forms of daily support are all examples of services that contractors/vendors provide to maintain people's independence. When disasters disrupt the services that older persons depend upon, they put in jeopardy the lifeline of support for many of these individuals.

D. The Role of the Long-Term Care Ombudsman Program During Disasters

Ombudsmen frequently visit nursing homes in the community, and are familiar with individual resident needs and the staff providing the resident's care. The majority of Ombudsman Programs already have a disaster plan in place and their presence in the facilities gives them a unique perspective that can ultimately be beneficial not only to the AAA and its staff, but to all those involved in a disaster plan. Ombudsmen can also follow up with residents after a disaster to assess the impact on them, and will then work to assure they are returned to the appropriate level of care.

The relocation or potential for relocation of long-term care residents due to disaster impacts the residents of these facilities in safety issues, quality of life, and quality of care, if even for a short period of time. The Ombudsman is designated by the Older Americans Act of 1965 to advocate for residents. Ombudsmen should play a pivotal role in facility evacuation, closure, and relocation to ensure that the rights of residents are protected.

Communication between the AAAs and Ombudsmen is critical since Ombudsmen are the individuals who are knowledgeable of facilities in the area, as well as being sensitive to State and local issues. Ombudsmen have a broad perspective of the issues involved such as licensing, regulations, staffing, and quality of care that all affect the residents. Representing the resident's needs and interests is their main goal.

Having responsibility for local long-term care facilities allows Ombudsmen to cross facility lines and they are able to see the big picture. They are the catalyst assisting others to fulfill their responsibilities to residents. Additionally, Ombudsmen can identify patterns of care issues when residents are transferred from one facility to another.

Ombudsmen are typically the people with expertise regarding transfer trauma. As such, the Ombudsman is the person that can help facilitate communication on this issue with all those involved in the process (e.g., nursing home staff, regulatory staff, and family members).

Ombudsmen can assist residents to find their families, ensure that residents take their medications with them, be a central information source, and assist with such things as finding other available beds, available transportation options, coordinate counselors if needed, and assist with any temporary or new placement.



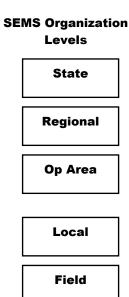
SEMS (Standardized Emergency Management System)

n California, the basic framework for managing the response to disasters is SEMS. A 1992 State law mandates that all State agencies responding to disasters use SEMS. County and local governments also must use SEMS to receive State reimbursement for expenses they incur in a disaster. Therefore, SEMS has become the California standard for organizing for disaster work, and in responding to disasters.

A. The Five SEMS Organization Levels

Think of the five SEMS organizational levels that follow as a hierarchy for requesting resources to meet disaster needs. The action starts with people out in the field responding to the emergency, and delivering services to meet needs. As these first level responders run out of resources, SEMS allows for the deployment of resources from the next level up. The process continues in this manner until all available State resources are deployed. A catastrophic disaster, such as a major earthquake, flood or act of terrorism, will ultimately activate the last or final level of support — federal emergency resources.

- Field The bottom level of SEMS consists of the first-on-the-scene responders to emergencies such as fire personnel, police, and paramedics. Community-based organizations, given their role in providing direct services to meet the needs of clients, are also considered to be at the field level.
- 2. Local Government For additional resources beyond the field level, the resources of local government form the next level of support. Each level of local government -- city, county or special district -- is responsible for coordinating the overall emergency response within its jurisdiction. An Emergency Operations Center (EOC) functions as the center for coordinating each local government's response. An emergency that affects multiple cities (earthquake, flood, wildfire, etc.) or an event that overwhelms the resources of local government (if a city runs out of resources), will activate the next level up.

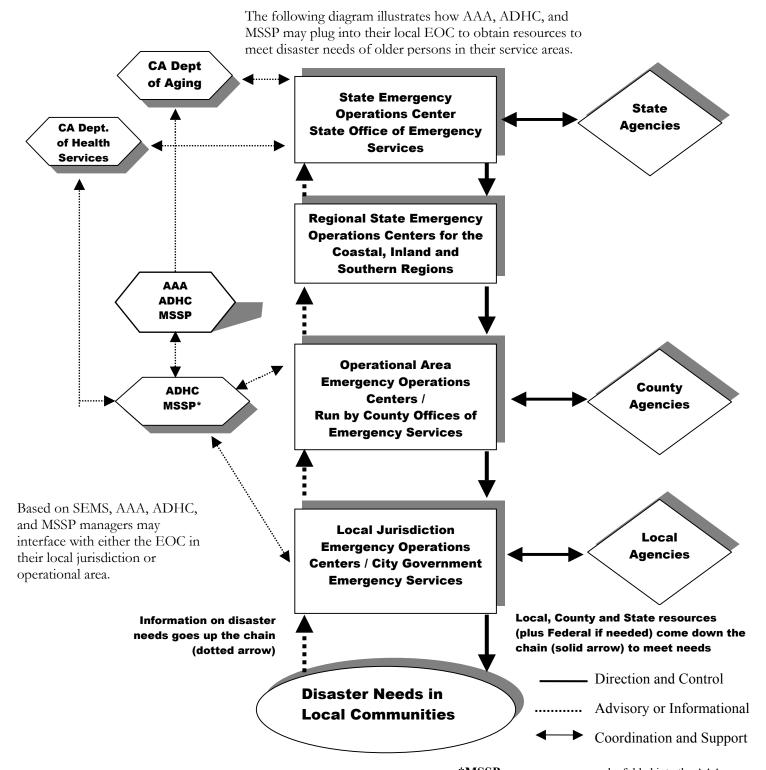


- 3. Operational Area (Op Area) Each of the 58 counties in California is designated as an Op Area. The Op Area includes all of the public agencies within that county including cities and special districts. It coordinates information, resources and mutual aid among all local governments within that county boundary. The purpose of an Op Area is to eliminate jurisdictional disputes about disaster management, especially who gets which resources. There is one Op Area commander who has responsibility for coordinating disaster response in that Op Area. Cities, counties or local government each operate their own EOC, but each local EOC is in communication with its Op Area.
- 4. Region The regional level is the next level up between the Op Areas and the final State government level. The Op Areas come under one of three State Administrative Regions Inland, Coastal, and Southern all managed by State OES. Each region handles mutual aid requests between the Op Areas within that region and State agencies or State resources. Therefore, if a county Op Area cannot provide the necessary requested assistance for a city in its area, then the Op Area would contact its appropriate OES Regional Office (Inland, Coastal or Southern) to request State assistance.
- 5. State Government Requests for support from the regional level trigger the deployment of State agencies with responsibility for emergency response. The State Emergency Operations Center coordinates State resources and integrates federal agencies as needed. When State resources cannot meet support requirements, the State may request a federal declaration of emergency to allow for deployment of the Federal Government's resources. The Governor's Office of Emergency Services in Sacramento administers the State Emergency Operations Center.

Some distinguishing characteristics of these SEMS levels:

- Emergency Operations Center (EOC) -- The command post. All decision-making in a disaster at the different government levels is coordinated within an EOC. Representatives from government agencies (police, fire, recreation, etc.) within a city or county comprise the EOC.
- Office of Emergency Services (OES) -- That office in each county and/or city responsible for that jurisdiction's emergency preparedness and disaster plans. There is also a State Office of Emergency Services to coordinate the State's disaster planning and response activities. Generally, the Emergency Services Coordinator for the OES is responsible for organizing that jurisdiction's EOC.
- Mutual Aid -- Planned and organized sharing of resources -- such as personnel, services, and facilities -- with other agencies when their own resources are inadequate or overwhelmed. Mutual aid is generally provided on a voluntary basis. SEMS facilitates mutual aid among other government agencies.

SEMS Flow Chart The Five SEMS Organizational Levels



B. The Role of SEMS for Organizations Serving Older Persons

The five SEMS organizational levels, together with the private sector, can be thought of as all the resources available within the State that may be applied in disaster response and recovery phases. Given a need for additional resources to meet the disaster needs of older persons (e.g., transportation, food, health workers, specialized shelter, etc.), organizations serving older persons should know how to access the system to obtain resources. The EOC, at each level of government, provides services or performs operations in the field. So how do the various managers of the AAAs, ADHCs, and MSSPs plug into the EOC at the Operational Area level or local city level?

1. If the AAA or MSSP is a part of government

If the AAA or MSSP is a part of government, it should have a formal tie to the EOC at either the county or the local level. Each agency of government generally sends a representative to the EOC when the EOC is in full activation during a disaster. Therefore, the first step is to identify the relationship that may already be in place between the department and/or agency in which the AAA/MSSP resides and the city or county EOC. If there is no existing relationship, one must be developed. Part of the AAAs and MSSPs disaster preparedness involves reviewing the larger department's disaster plan and/or contacting its city or county office of emergency service for further orientation. For AAA or MSSP representing multiple counties, the task must involve contact with each county office of emergency services.

2. If the AAA, ADHC or MSSP is not part of government

If the AAA, ADHC or MSSP is not a government entity, it must actively participate in disaster and emergency preparedness planning. This will require the development of a direct relationship and facilitation of a direct channel to its city or county EOC in times of disaster. Prior to an emergency, call the city or county Office of Emergency Services for further orientation. Ask how you would access the EOC in an emergency and whom from their office would be your contact or liaison person.

The AAA as a Broker of Resources

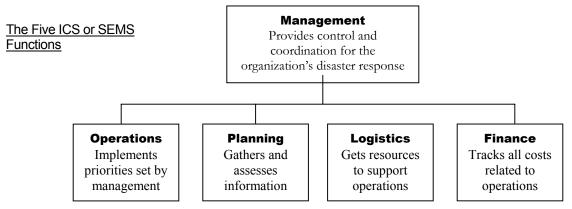
In a disaster, the AAA has the authority to act as a "broker." The AAA that contracts with a number of providers is in a unique position to facilitate distribution of resources among contractors following a disaster. Given that resources are limited, it makes sense to try to work with providers and pool resources before requesting outside help from your local jurisdiction's EOC or Operational Area. For instance, if one provider suffers kitchen damage and is unable to prepare meals, perhaps there is another provider available to prepare additional meals. The AAA should act as a point of coordination for the organized sharing of resources and personnel among providers when a particular provider finds its own resources are overwhelmed. Information and assistance/referral services play a crucial role in disasters.

MSSP and ADHC providers are in a position to advocate for the needs of individuals served by their respective programs. The ADHC can act as a point of coordination between other ADHC facilities in the area or surrounding areas to pool resources in order to continue to meet the needs of their participants. The MSSP can advocate for

disaster support and resources for their clients through contacts with other MSSP sites and local emergency agencies.

C. The Incident Command System -- ICS

How are EOCs at city, county, and State government levels organized? SEMS law designates that the ICS serve as the organizational structure to plan and coordinate disaster work.



Think of the ICS in terms of functions that must be accomplished in disaster response. A large organization, such as an EOC, will have numerous departments under each function. For example, Operations may list branches for Police, Fire, Public Works, Health Services, etc. By comparison, a very small AAA, ADHC, and MSSP may find the Executive Director performing all five functions. ICS is about functions in disaster response, not necessarily staff positions.

For AAA, ADHC, and MSSP, the SEMS Incident Command System provides a disaster management structure model. In emergencies, organizations must develop an emergency table of organizations separate from their normal, day-to-day organization. In an emergency, the organization needs provisions for expedited purchasing processes, flexible modes of information gathering and decision-making (to respond to the changing priorities of a disaster), and special processes to ensure that emergency expenditures are captured. ICS provides for the proper level of control of these needs and functions.

The Five ICS Primary Functions

- 1. Management -- The management function, which sometimes appears as command, has overall control of the organization's disaster response. Therefore, directing and setting priorities are primary functions. Key responsibilities are as follows:
 - Responsible for overall emergency policy and coordination across the organization's span of control.
 - Responsible for liaison with other agencies.
 - In AAA, ADHC, and MSSP, the Executive Director or Disaster Coordinator assumes the management function.

- 2. Key responsibilities are as follow:
 - Implement the emergency plans and/or implement priorities as established by management.
 - Coordinate the provision of services or operations that the organization provides following a disaster. In other words, implement the organization's disaster mission. Determine if information and assistance/referral services should be expanded.
- 3. Planning -- Sometimes listed as planning/intelligence. Planning is responsible for the collection and evaluation of information about the emergency. Staff responsible for the planning function should monitor sources of information about the emergency and advise in the development of strategic plans for the organization's emergency response. For example, if an organization depends on deliveries of materials, planning can keep track of important road closures, etc. Planning might get information from news media, reports from staff in the field or a government EOC. Key responsibilities are as follows:
 - Collect, evaluate, and disseminate information, and maintain documentation.
 - Develop action plans in coordination with other functions (that are then carried out by staff in operations).
 - In an AAA, ADHC, and MSSP, there needs to be a designated contact person or department for the organization to be most effective in its disaster work.
- 4. Logistics -- Logistics is responsible for providing equipment, supplies, support systems, facilities, personnel, etc., in support of the organization's disaster operations. Key responsibilities are as follows:
 - Provides facilities, services, personnel, equipment and materials (i.e., obtains the resources to support operations).
 - In an AAA, ADHC, and MSSP, this might be an office manager or facilities manager - whoever is good at getting the things you will need in an emergency.
- 5. Finance -- Finance, which sometimes appears as finance/administration, is responsible for financial and administrative functions not assigned to the other functions. Finance must ensure that staff time and costs are properly accounted, and claims and contracts are properly executed. Key responsibilities are as follows:
 - Manage financial activities and administrative aspects not assigned to other functions.
 - Record keeping and documentation, setting up new accounts for emergency expenditures; seeking reimbursement for disaster expenses.
 - This function is vital for AAAs, ADHCs, and MSSPs: If reimbursement is going to be sought, one person <u>must</u> be tasked to maintain complete and accurate records from the very beginning of disaster activities.

Four Phases of Emergency Management

These four phases of emergency management are critical to the success of managing any disaster. Together they comprise the basis for an effective Emergency Management Plan. The following chapters will provide details for each of the phases noted below and will identify the roles and responsibilities of your organization in effective emergency management.

1. Preparedness

All the planning activities to get the agency and individuals ready for a disaster (e.g., drills, procedures, supplies, agreements, etc.). It includes joint planning with other community organizations for coordinated response.

4. Mitigation

These are actions taken to reduce the risk of hazards and to reduce potential human suffering and property loss. It includes structural (strapping, bolting, reinforcing) and nonstructural actions (setting standards) taken pre-disaster.

2. Response

Response actions include activating the disaster plan, assessing disaster impact and then initiating activities to save lives or ensure the immediate safety of older adults.

3. Recovery

Recovery involves sustained care offered over a longer period to help people reestablish their lives. It is the phase when organizations serving seniors are the most engaged in disaster work.

Section

Disaster Preparedness

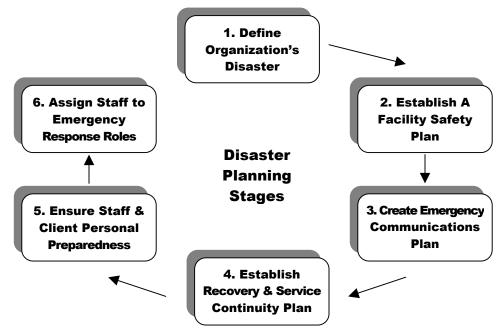
he preparedness phase involves activities undertaken to build a response capacity in advance of an emergency. Disaster plans are developed to guide disaster operations and to ensure the continuity of critical services.

A. Planning for Disasters

The six stages of disaster preparedness guide the planning and preparation for disasters. The result of working through each stage is a comprehensive disaster plan that will not only help the organization to survive a disaster, but will ensure a quick recovery from disaster as well.

1: Preparedness

All the planning activities needed to get the agency and individuals ready for a disaster (e.g., procedures, supplies, drills, and planning with other community organizations for coordinated responses.)



1. Define the Organization's Disaster Mission

How will your organization respond following a disaster? It is easier to plan and prepare for disasters once there is a clear identification of the mission in the aftermath of a disaster. Will you continue to provide the same services, expand services or perhaps provide new and different services?

- The primary disaster role of organizations serving older persons includes:
 - a. Maintaining the continuity of agency services to older persons,
 - b. Ensuring that the special needs of all older persons are adequately met for a safe and full recovery from the disaster.

The disaster mission might also include some of the following roles:

- Assisting older persons with their emergency needs that overlap with services;
- Providing information and assistance to consumers and others based on their pre/post emergency needs;
- c. Advocating on behalf of older persons based upon their post-emergency needs:
- d. Resuming day-to-day direct services as quickly as possible;
- e. Joining with local emergency preparedness partners to coordinate services for older persons.
- Expect a dramatic increase in both service demands and in the needs of the persons you serve.
- Involvement in disaster work is inevitable for organizations serving seniors. They will
 either act to provide relief for older persons, or serve an advocacy role to ensure that
 seniors get the services they need to recover from disaster.

2. Establish A Facility Safety Plan

How safe is your facility in a disaster (both your administrative facility and client services facility)? Moreover, what emergency supplies are on hand to help you in the response to any emergency?

- Do a hazard hunt and mitigate any obvious problems (e.g., move heavy items from top to lower shelves and secure items that might topple or break in an earthquake).
- Know how/where gas, electricity, and water are turned off at your site.
- Store a backup supply of food and water for staff and clients. Senior Centers and Adult Day Health Care Centers may become temporary shelters if clients need to "shelter in place" during the emergency.

- Basic emergency supplies to have on site include a battery powered radio, flashlights and spare batteries, blankets, extra water, high energy snack foods, an adjustable wrench for turning off gas, and a first aid kit.
- Take photographs documenting the interior and exterior of your facility to help later in recovering costs due to facility damage or equipment loss.
- Develop an evacuation plan and conduct evacuation drills, accounting for staff and clients.

3. Create An Emergency Communications Plan

How will you communicate with staff and outside facilities, such as subcontractors, if telephone service is unavailable? Agencies serving older persons need to develop their own reliable alternate communications systems.

- Use cell phones from different communication providers or in different area codes.
- Identify local amateur radio operators; ham radio is available at each neighborhood fire station.
- Prepare to use runners (messengers on foot or bicycle).
- Devise a plan for notifying staff (e.g., telephone tree) if the disaster happens after hours. Which staff will need replacement if they are unable to report? Keep a staff roster with address and telephone numbers at home.
- Maintain an external list of emergency agencies such as fire department, law enforcement agencies, and other disaster authorities of local government.

4. Establish A Recovery & Service Continuity Plan

How are you going to continue to provide services if you cannot occupy your building or experience a significant resource shortage?

- Identify a relocation or alternate work site: can you share space with another agency? Is there an option of some staff telecommuting?
- Identify critical staff and critical services. What backup plans, mutual aid or vendor agreements are necessary to continue those services? Be prepared to set priorities on agency services when disaster demands exceed capacity. Can you replace some staff with volunteers or mutual aid?
- Consider the supplies that you regularly purchase and from whom. What will happen
 if a disaster interrupts the delivery of these supplies? Be aware of other suppliers or
 vendors to use in an emergency or ensure an ongoing backup supply of these items.
- Protect vital records (computer and paper files). Have a back up of vital records.
- Programs providing meal services should have at least three days worth of food and water on hand (or as directed by statute or regulations for ADHC). Purchase or know where to rent a backup generator for the kitchen. Arrange with neighborhood restaurants to support you in an emergency.

5. Ensure Staff & Client Personal Preparedness

With staff as your most vital resource, how are you going to ensure their well being in times of disaster? Moreover, how will you ensure the preparedness of people that you serve? Staff's immediate emotional response to disaster will be for assurance of their families' well being. Employees who are worried about their families will not be effective until they have reassurance.

- Develop Family Disaster Plans that encourage the use of an out-of-state telephone contact for family check-in. Connecting out-of-area calls is quicker as local circuits are initially overwhelmed after disaster.
- Educate the people you serve on some basic steps that they can take now to prepare for emergencies (contact the local Red Cross or Office of Emergency Services -- see next section on Community Resources).
- Prepare to deal with longer-term problems such as burn out and overload from extraordinary demands, long work hours, stress, etc. Demands of the situation (adrenaline) can help or be your worst enemy. Know when to cut back on efforts, given staff burnout, and know how to provide relief for staff.

6. Assign Staff to Emergency Response Roles

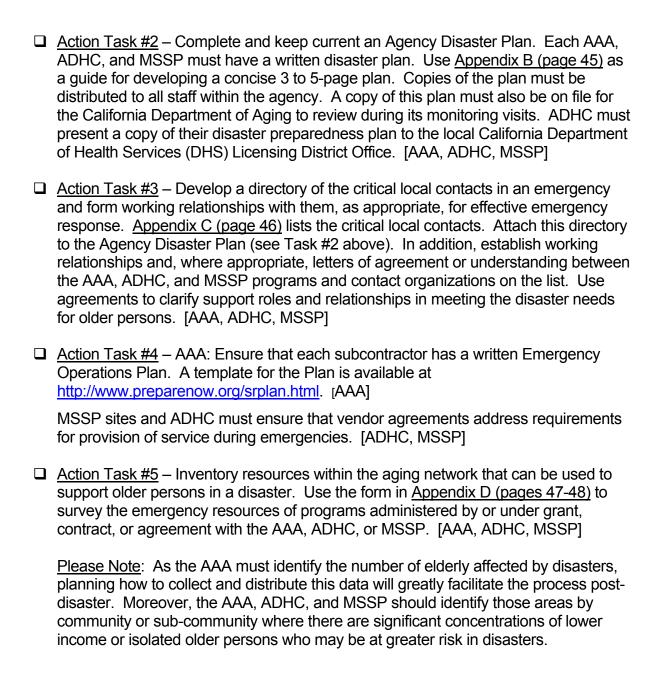
How do you ensure an effective organizational response in an emergency? SEMS encourages any disaster response to be organized along the following five functions. Therefore, assign agency staff to assume responsibility for each function. Please see Section 2 on the Incident Command System for more details.

- Management and Command someone at the scene needs to take charge, delegate responsibilities, and provide overall direction.
- Operations someone needs to perform the actions required to get people to safety, restore services, meet needs or help with recovery.
- Planning someone needs to get information and provide assessments about the emergency and related needs.
- Logistics someone needs to work on obtaining the resources that operations may require.
- Finance someone needs to be responsible for tracking expenditures, hours worked, and documenting events as they occur.



B. CDA Requirements of AAAs, ADHCs, and MSSPs Regarding Disaster Preparedness

Action Task #1 – Designate an Emergency Services Coordinator. The Emergency Services Coordinator takes responsibility within the agency for emergency planning and preparedness and oversees the completion of 15 action tasks listed in this document. [AAA, ADHC, MSSP]



For a complete list of <u>all 15 CDA Action Tasks</u> from preparedness to the recovery phase, please see <u>Appendix A - Checklist of AAA, ADHC, and MSSP Program Responsibilities</u>

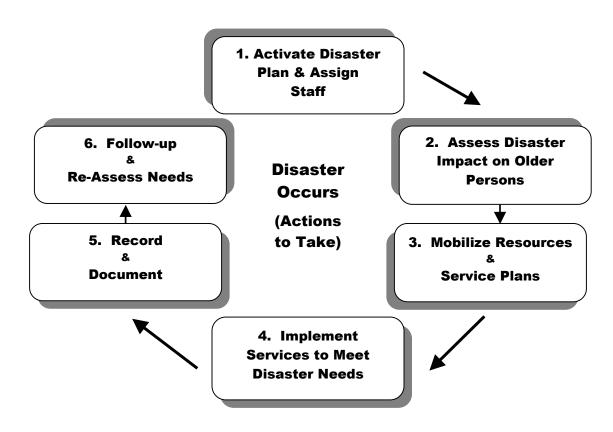
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Disaster Response

esponse is the second phase of emergency management. This section refers to events that take place immediately following a disaster. The emphasis is on saving lives and controlling the situation. It includes activities such as evacuation, medical attention, and mass care and shelter for people displaced from their homes. During this phase, the Incident Command System functions of SEMS are initiated (see Section 2), emergency operations centers of government are activated, and emergency instructions are issued to the public.

2: Response

Response actions include activating the disaster plan, assessing disaster impact and then initiating activities to save lives or ensure the immediate safety of older adults.



A. Initial Response Actions

The following actions begin in the response phase and proceed through to the recovery phase, or in some cases until a decision is made to resume normal operations. Think of these six items as a checklist of activities that you need to perform following the onset of disaster.

1. Activate Disaster Plan and Assign Staff

- Put emergency response plans into operation, and prepare to take actions required to cope with the disaster situation.
 - Check on staff, clients, and damage to facility. Will relocation of operations be required? Assess communications capability.
- Set up command. Bring staff together and set up your own department's operations center to manage emergency operations. Allow staff to check-in with families for assurance that everyone is okay.
- Make staff assignments; initiate plan of who will do what, where, when, and with whom. Designate staff to assume the SEMS functions of Management, Operations, Planning, Logistics, and Finance as needed (see Section 2 regarding the SEMS Incident Command System functions).
- Notify the California Department of Aging Emergency Services Officer by telephone that the AAA, ADHC, and MSSP have activated their disaster plan. The phone number is 916-322-3887, ask to be connected with the CDA Emergency Services Officer.

2. Assess Disaster Impact on Older Californians

- Assess the disaster impact on both seniors and network resources (what is working and what is not). Where are there service gaps?
 - Is there a need to check on older persons at greater risk to see if they are okay (those isolated, more frail elders, who live alone)?
- If communications (telephones, e-mail and fax) are disrupted deploy staff persons into the community to have them personally check on the status of facilities or personally survey and assess needs.
- Provide initial assessment data to local and county disaster officials so they can
 estimate the extent and severity of the disaster and plan accordingly (i.e., get the
 resources that you need). Decide upon and communicate service priorities to be
 pursued.
- AAA, ADHC, and MSSP must also communicate with CDA about the impact of the disaster on the senior population. See Appendix E, (pages 49-51), <u>Assessment of</u> <u>Disaster Impact on Seniors</u>; this form provides an outline of potential impacts caused by disasters.

3. Mobilize Resources and Service Plans

- Begin the ongoing coordination needed within the organization, provider network, or service area to (1) restore essential services to older persons, and (2) ensure the provision of disaster assistance to older persons.
 - Determine the resources needed for network service continuity and to address the immediate disaster needs of older persons; begin to mobilize resources within the service network.
 - Respond to requests from providers for resources; establish priorities given scarce resources.
 - Coordinate mutual aid among providers as needed for transportation, food, water, power, supplies, staffing, and other resource needs.
- Maintain ongoing liaison with local (city or county) emergency services coordination personnel (through the EOC). Provide the EOC with ongoing updates on needs assessments and determine, in conjunction with local emergency service personnel, the service priorities to be pursued. Use the EOC, as appropriate, to obtain resources needed to restore essential services and to meet the identified disaster needs of older persons.

4. Implement Services to Meet Disaster Needs

- Develop action plans; continue to coordinate services to meet identified disaster needs, given the initial assessments and resources available above.
 - If evacuation is required, some older persons will need assistance packing and moving.
 - If there is a need to open mass care shelters, older persons will have multiple needs -- transportation to shelters, filling prescriptions and care items, reassurance, accessing services, etc.
 - If there is a concern that more frail older persons are at risk, organize some type of home check-in to ascertain status.
- Expand Information and Assistance/Referral (I&A/R) services and include information on how to obtain disaster assistance. Prepare for calls about the need for home cleanup, how to replace lost items, or how to obtain financial assistance for disaster-related damage.

5. Record and Document

 Keep a disaster activity log with detailed records of agency critical meetings, decisions, and actions. Record and document important inter-agency contacts and agreements. This is vital for after-action reports, and for future planning.

- Save copies of all receipts and track all disaster related expenditures, including staff time beyond normal working hours. To recover disaster-related expenses, documentation is critical. Reimbursement depends on complete, detailed, and accurate records from the first hour forward.
- Keep track of the type and amount of services provided, such as number of senior contacts and any authorized contracted services. For documentation purposes, save copies of senior intake forms.

6. Follow-up and Re-Assess Needs

- Continue with ongoing assessment, mobilization of resources and coordination of services to meet needs. New and different needs in new locations will become apparent as more information is gathered. Needs assessment continues into recovery.
- Continue to communicate and share information with local and county emergency operations centers, as well as with CDA.



B. CDA Requirements of AAA, ADHC, and MSSP Regarding Disaster Response

Action Task #6 – AAA: Assess the impact of the disaster on both seniors and network resources. Determine what sites and/or services are not operational, while also assessing what extra service capacity or resources are available to pool among providers, or to use for service expansion. Make every effort to minimize the period of downtime when sites or services are interrupted. [AAA]

ADHC and MSSP emphasis would be on assessing impact to service providers that consumers rely upon. [ADHC, MSSP]

Note: These assessment efforts continue through to the recovery phase.

In assessing the disaster impact on the senior population, consider the following:

- Number of affected older persons
- Disaster needs of seniors and services required (consider both short and long-term needs)
- Identification of geographic areas or communities with disaster damage

Place special emphasis on those areas where elderly persons may be hardest hit:

- Trailer or mobile home parks
- Single room occupancy hotels

- Low-income areas (i.e., neighborhoods where people have fewer resources)
- Areas where housing supply is older (assumes a greater concentration of elderly homeowners)
- Senior housing communities
- Residential care facilities for the elderly, e.g., board and care homes, assisted living
- Skilled nursing facilities
- Adult Day Health Care Centers or Adult Day programs
- Alzheimer's Day Care Resource Centers
- Action Task #7 AAA Contact local (city or county) emergency services coordination personnel at the EOC. Convey assessment results. Determine, in conjunction with local emergency services personnel, the service priorities to be pursued. [AAA]

<u>Note</u>: As per SEMS, utilize your local EOC or Op Area EOC to request resources based on the assessment above (Task 6). However, resources may be limited the first few days following a major disaster event.

- ☐ Action Task #8 Contact the California Department of Aging's Emergency Services
 Officer within 24 hours of the onset of disaster. Provide a brief summary of the initial
 assessment. [AAA, ADHC, MSSP]
- Action Task #9 Submit the form, Assessment of Disaster Impact on Seniors, (see Appendix E pages 52-54) to the California Department of Aging's Emergency Services Officer, within three days of the onset of a disaster. [AAA, ADHC, MSSP]

<u>Note</u>: If possible, this form should be submitted within 24 hours. Yet it is understood that following a major disaster, with limited communication, it may take three days to do a thorough assessment.

☐ Action Task #10 – AAA- Brief Information and Assistance/Referral staff, and expand I&A/R services as appropriate. [AAA] This service continues into the recovery phase.

For a complete list of <u>all 15 CDA Action Tasks</u> from preparedness to the recovery phase, please see Appendix A - Checklist of AAA, ADHC, and MSSP Responsibilities, Page 42-44.

Disaster Recovery

nce the immediate response to the disaster has concluded, or once people are out of harm's way, the third phase of emergency management begins. This is the recovery phase. The goal is to return the community to its pre-disaster condition. Much of recovery involves government and communitybased disaster aid programs. AAAs, ADHCs, and MSSPs become central players in the recovery process because of the relationships and pathways they have in (1) assessing disaster needs and (2) getting services to persons with special needs.

Α. AAA, ADHC, and MSSP Role in Recovery

A sustained, long-term commitment to providing human services is needed to restore the community and all its residents to a state of well-being. As the primary spokesperson for the needs of older persons within the service or catchment area, the AAA, ADHC, and MSSP (especially the AAA) must play a lead role in the following areas:

- Ongoing Disaster Needs Assessment (Unmet Needs) Disaster needs continue to surface among older persons long after the event. For the AAA, the challenge is to identify persons with unmet needs. These needs may be hidden due to language barriers, cultural or geographic isolation, or in some cases, a reluctance of older persons to admit a need for help. For ADHC and MSSP providers, the challenge is communicating with participants/clients to determine if the disaster has impacted their existing needs or has generated new needs that must be addressed.
- Expand Services to Meet Needs As recovery committees form, and disaster assistance dollars become available, the AAA will need to clarify where those dollars should go and which services need expanding to meet needs. ADHC and MSSP providers will need to determine if additional services are needed following the disaster.

3: Recovery

Recovery involves care that is offered over a longer period to help people reestablish their lives. It is the phase when organizations serving seniors are the most engaged in disaster work.

- Community Advocacy Ensure that older persons eligible for disaster assistance receive
 the appropriate services. Outreach is required so that people are aware of what is
 available and know where to go to receive it.
- Ensure a Coordinated Response AAA, ADHC, and MSSP must continue coordination and consultation activities with all the other agencies involved in disaster recovery (e.g., Red Cross, Interfaith Groups, other Community-Based Organizations, Federal Emergency Management Agency (FEMA) and other local and State government agencies), as appropriate.

Delivering Disaster Recovery Services

The following services are necessary to help older disaster victims until they have recovered or no longer need assistance. The role of the AAA is to ensure that needed services are identified, that funding for the services is obtained, and that services are provided. The AAA will either provide or advocate for the provision of the service. ADHC and MSSP should coordinate with the AAA serving their local community in order to be fully informed about various services that might be available to participants/clients through the AAA or disaster relief organizations.

In many cases, the AAA will allow service providers to expand existing contracts to meet disaster needs, (e.g., nutrition, transportation, case management, etc.). ADHC may seek additional days of service for participants who are at risk or who have had their support network (family/care workers) disrupted. MSSP care managers may need to assess additional need for services or expanded services may be necessary to sustain a client who has been similarly impacted. The AAA should communicate with CDA to determine if funding is available beyond the normal scope of allowable services. Similarly, the ADHC or MSSP provider should contact the Department of Health Services (DHS) to determine if Medi-Cal has made provisions for expansion of services during the disaster.

Older persons may require the following recovery services:

- 1. Expansion of Information and Assistance/Referral Services -- AAAs should consider the need to set up an 800 emergency relief hotline for seniors as soon as possible after the disaster or use an existing 800 number and inform the media of the established hotline. ADHC and MSSP providers should direct participants/clients to the emergency relief hotline, and also provide information about how to contact staff/care managers from their respective agencies if there has been disruption of usual phone numbers. Provide information on disaster relief services for older persons; make disaster resource information available in a variety of languages.
- Expansion of Congregate and Home-Delivered Meals -- Residential areas may experience the loss of gas or electricity, so the demand for meals may increase. This may include the provision of food in bulk through a distribution center, or expanding the number of hot meals or home-delivered meals prepared at nutrition sites.
- 3. Outreach Activities -- Contact isolated and homebound older persons to check on their status, and to support them in getting the services they need. Includes ongoing

- assessment of recovery needs and getting food, water, and other necessary supplies distributed to persons living alone or in isolated areas (see Disaster Outreach and Advocacy subsection below).
- 4. Transportation -- Provide accessible transportation for older persons during evacuation periods or to sites to receive disaster services.
- 5. Care Management Services -- Assess needs, develop care plans, recommend or authorize services, and perform reassessment and follow-up. This may include referrals for clothing, housing, medical care, counseling or financial assistance.
- 6. Licensed Appraiser Services -- Assist seniors to get realistic estimates for disasterrelated home damage. This includes protecting seniors from unscrupulous vendors who might take advantage of the disaster confusion (licenses for contractors should be verified).
- 7. Home Cleanup and Restoration -- Includes those activities to restore homes to their pre-disaster condition, from the cleanup of disaster damage to small home repairs, and potentially, larger rebuilding needs. For larger home refurbishing needs, separate loans or funds may become available for victims.
- 8. Relocation or Moving Assistance Assistance to move seniors from their own residence to temporary housing, or from temporary housing back to their initial or new place of residence.
- Mental Health Services -- The AAA should maintain a list of agencies available to provide counseling to older disaster victims with post-traumatic stress or other emotional needs.
- 10. Legal Services -- Providing the support necessary to help older persons with insurance settlements or filing other appeals for assistance; and to ensure that older persons receive their proper entitlements.
- Relocation Housing Arranging temporary housing for older persons, or alternatives to mass care public shelters. Assisting older persons with housing after disaster shelters close, (i.e., longer term or transitional housing).
- 12. Respite Care and Adult Day Care -- Arranging personal care assistance to meet the increased demand for in-home care support since regular caregivers may be unavailable post-disaster. In some cases, this will enable older persons to avoid using public disaster shelters where care is very limited. Providing temporary assistance with caregiver responsibilities, if the primary caregiver needs respite.
- 13. Equipment Repair and Replacement -- Helping older persons replace personal equipment (e.g., hearing aids, dentures, eyeglasses, wheelchairs, batteries, etc.) damaged or lost in the disaster. Also helping older persons fill prescriptions for necessary medications.
- 14. Assisting at FEMA Help Centers -- Getting the word out to seniors about the assistance available; letting them know what to expect, and how the system works.

Providing coaches or advocates to help older persons in how to best present their case or need for disaster assistance. Assisting in forms completion; physically escort seniors between service points; and following-up with seniors to ensure needs are met.

15. Older Americans Act – Administration on Aging (AoA) Reimbursement Section 310 of the Older Americans Act provides for Disaster Relief Reimbursement to State Units on Aging (SUA) in a Presidential declared disaster area. The amount of Title III dollars earmarked and held back from the formula grants to states is an amount that equals two percent of the Title IV allocation each year. As this amount is limited, it must be noted that individual awards are quite modest when compared with the actual need.

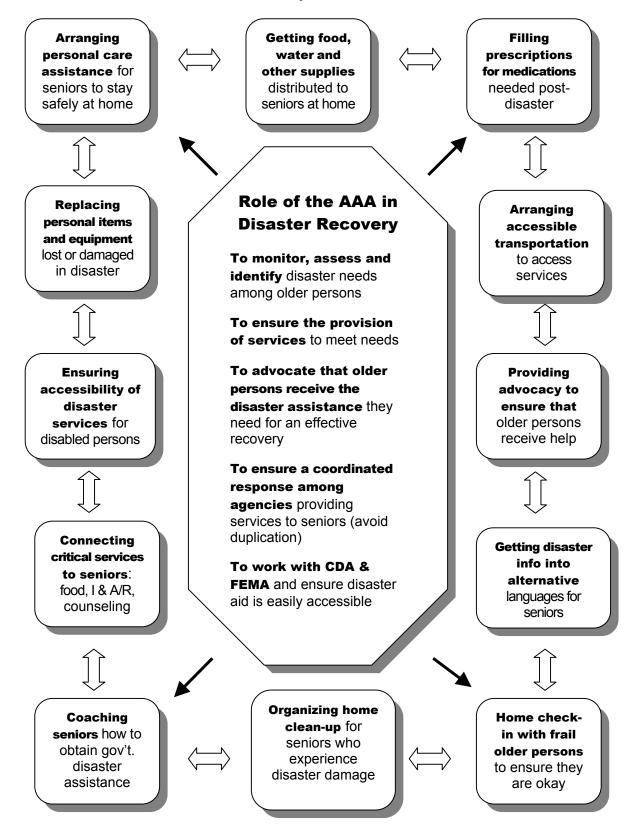
The amount of disaster relief funds AoA will receive is uncertain until the funds become available. Typically, the AoA money is used for gap filling services, the most frequent requests are for:

- Advocacy
- Meals
- Transportation
- Relocation to temporary living quarters (or permanent)
- Chore service, and
- Clean-up

Requests for AoA funding must be submitted after FEMA, Red Cross, and other relief avenues are depleted.

AAAs should be thinking about what activities or services may be considered for disaster relief funds. When funds are available, AoA will attempt to award within 24 to 48 hours upon receipt of the application. Grant money must be used within the grant period and cannot be carried over. These funds are subject to AoA Commissioner's practices of imposing no match requirements.

Role of the Area Agency on Aging in Meeting the Disaster Recovery Needs of Older Persons



Disaster Outreach and Advocacy

Active involvement in the community is necessary during the recovery phase to identify the unmet disaster needs of elderly persons and to make them aware of disaster assistance programs. In the confusing aftermath of a serious disaster, many elderly persons may be unaware or unsure of how to access recovery assistance. Post-disaster community education is essential to get the word out about available recovery services. Post-disaster outreach and advocacy is also essential to ensure that all older persons in need of services receive help.

Working through the more formal network of residential and community program service providers is the quickest means for outreach to the senior population. However, this approach does not always reach older persons who are culturally isolated, non-English speaking, or homebound. This presents the greatest challenge in connecting services with needs. In some cases, organizing outreach teams to go door-to-door is the most effective means to assess and meet needs. To make the outreach effort as inclusive as possible, add the following sources to your network for reaching older persons.

- Agencies that provide housing for the elderly
- Agencies that provide meals for seniors in a group setting
- Agencies that provide respite for caregivers
- Agencies that provide special recreation programs for the elderly
- Agencies that provide transportation for older persons
- Local congregations and congregation leaders
- Senior Citizen Clubs, or Older Americans' Clubs
- Mail carriers
- Grocery stores or pharmacies that deliver
- Programs or church groups that visit the homebound
- Desk clerks of single occupancy hotels
- Community organizations such as the Lions, Rotary, Easter Seals, SIRS, Veterans Service Organizations, AARP, Gray Panthers, Older Women's League, etc.

Disaster Recovery Task Force or Unmet Needs Committee

The most practical process for addressing recovery issues is to establish a Recovery Task Force or Unmet Needs Committee of the organizations that will be most active in the recovery phase. In fact, it may be one of the more visible providers in the community, such as the United Way, Information and Referral Agency or the Red Cross that initiates the process of bringing the group together. The local AAA is a very important resource to this group and will play a lead role on disaster recovery issues concerning older persons. In some cases, the AAA may want to initiate these meetings. ADHC and MSSP providers will also be critical members of this coalition due to the frail population of elders served by their programs and their connections with a variety of service providers in the local area.

The purpose of the Recovery Task Force or Unmet Needs Committee is to coordinate resources to meet identified needs. As part of the recovery process, government and other

disaster relief organizations begin to supplement local efforts with additional disaster relief services (see subsection that follows on Community Recovery Programs for Older Persons). The challenge with many outside resources coming into a community at once is keeping the system coordinated. The goal is to fill gaps and make sure that recovery resources and services reach all populations with needs and that all organizations involved are working together and not duplicating efforts.

Members of the task force will include direct service providers active in the recovery phase, officials from government disaster aid programs, representatives from private or community foundations and, possibly, publicly elected officials. The task force will determine how to fill unmet needs in the community given the resources represented on the committee. Moreover, with the representation of public officials, the group will have leverage to access further outside resources. Organizations serving older persons play an important advocacy role by ensuring that the committee understands the needs of older persons.

Overcoming the Psychological Impact of Disaster

After encountering the devastation wrought by a disaster, some older adults will experience feelings of insecurity and vulnerability and these feelings may be magnified by the destructive, out-of-control nature of the disaster. They may react with feelings of increased hopelessness. The loss of personal items such as photos or important mementos may be just as great a loss as the house itself because of the connection they represent to important memories.

Even if an older person is not directly impacted by the disaster, they may have friends, neighbors, or other family members that were directly affected. Moreover, devastation to the greater community leaves all members within that community as victims to some extent (i.e., persons who become secondarily impacted). As survivors struggle to cope with loss, they can benefit greatly by counseling from skilled persons. The AAA, ADHC, and MSSP should recognize that just giving older persons a chance to talk about the event and express their thoughts is very helpful to the person. Psychologists call this kind of "talking out" of a problem a "catharsis." This means the victim is opening-up and is letting out the stress that has built up from the traumatic event.

Aggressive outreach strategies become key components as many survivors do not call and make appointments for help. Frequently, they do not realize that their emotional struggles are disaster related. Many may have limited mobility or access to transportation. Recovery also means negotiating with insurance companies and contractors, filling out seemingly endless forms, and moving from one temporary home to another. It also means coping with life's everyday problems while in a very unsettled position.

B. Community Recovery Programs for Older Persons

The goal of recovery assistance is to help a community and its citizens recover from the disaster. The following are some of the resources that come into play following a disaster, in which victims of a disaster may obtain disaster assistance.

1. FEMA

FEMA and the resources of the federal government are applicable once a disaster receives a federal declaration, (i.e., when the impact of the disaster overwhelms the response capacity of local and State resources). FEMA operates two broad assistance programs. First, the <u>Public Assistance Program</u> reimburses local and state governments and eligible private non-profit organizations for structural damage and for the costs of disaster work. Second, the <u>Individual Assistance Program</u> offers disaster assistance to families and individuals in a variety of formats. The following are some of the resources under the Individual Assistance Program.

Assistance for Individuals and Households -- Provides cash grants of up to \$25,000 per individual or household for the following.

- Housing Assistance: reimburses lodging expenses (for a motel or hotel), rental assistance, home repair cash grant, or home replacement cash grant.
- Other Needs Assistance: reimburses medical, dental or funeral costs, transportation costs, and other disaster-related needs.

Low Interest Loans -- Low interest loans are available to cover expenses not covered by State or local programs or private insurance.

Crisis Counseling -- Services provided to relieve any grieving stress or mental health problems caused or aggravated by the disaster.

FEMA Disaster Assistance Process: Much of the processing for applicant claims is now done through a toll-free 800 tele-registration number (1-800-621-FEMA), versus going to a Disaster Assistance Center (now called Help Center). For more information go to http://www.fema.gov.

2. American Red Cross

Provides food and operates public disaster shelters. In addition, the Red Cross provides emergency financial assistance to disaster victims. Finally, the Red Cross provides mental health services to disaster victims and in some cases will help with home repair and cleanup. For more information, visit http://www.redcross.org.

3. Voluntary Agencies

There are established disaster relief organizations, which for the most part are faith-based and national in scope, yet play a major role in disaster recovery at the local level. Most of these organizations are part of a national network called VOAD (Volunteer Organizations Active in Disasters). For more information, visit www.nvoad.org. Examples of some of these organizations are as follows:

Adventist Community Services -- Distributes clothing, bedding and food products in a major disaster, and provides counseling.

Mennonite Disaster Services -- Provides volunteers to clean up and remove debris from damaged and destroyed homes and personal property.

Nazarene Disaster Response -- Provides clean up and rebuilding assistance, especially for the elderly and disabled.

4. Interfaith Groups

Following a disaster, an interfaith group of local congregations may form to provide financial and personal aid to disaster victims. These programs generally have no eligibility criteria, so anyone who needs help gets assistance. Church World Service (CWS) facilitates and helps to guide the development of an interfaith group in the aftermath of disaster. For more information, visit http://www.cwserp.org.

5. Community Foundations / Community Block Grants

Based on past disasters, community and private foundations, private businesses and individual donors generally will make very large contributions to help with disaster relief. A local foundation may act as the lead recipient for contributions, and a long-term recovery committee, comprised of diverse community representatives, may oversee distribution of the funds. Funds are distributed to both individuals in need and community organizations active in recovery.

6. Salvation Army

The Salvation Army feeds, shelters and provides clothing for disaster victims. Additionally, disaster victims may receive financial and other material support to cover needs for replacement items. The Salvation Army often serves as a collection and distribution agency.

Visit their disaster assistance Web site to learn about available resources. http://www.tsagoldenstate.org/default.asp?page=whatwedo&menu=whatwedo&s=5.



C. CDA Requirements of AAA, ADHC, and MSSP Regarding Disaster Recovery

Action Task #11 – AAA - If FEMA has been activated, assign specific AAA staff or volunteers to the local FEMA Help Center (formerly known as a Disaster Assistance Center or DAC) to serve as "Disaster Advocates" for seniors. [AAA]

MSSP and ADHC providers should ensure that all care managers are provided with specific information that is to be provided to clients. [ADHC, MSSP]

<u>Note</u>: The "Disaster Advocate" can be invaluable to seniors by: (a) reassuring seniors that they are eligible for assistance; (b) assisting in forms completion; (c) physically escorting seniors between appropriate service points; (d) following up to

ensure that older victims receive approved grants or services; (e) protecting older victims from unscrupulous vendors; and (f) generally providing reassurance for the older victim.

Persons in this extremely critical assignment will be particularly important during the first five days of the Help Center operations. They will also be a critical information resource for FEMA Help Center staff who usually will not be familiar with local needs and resources.

Action Task #12 – Assign AAA staff or volunteers to do special outreach and/or be
an escort for older victims who may not be aware of available assistance or who may
feel that seeking such services may be futile for older persons. [AAA]

<u>Note</u>: Individuals performing special outreach or escort services should be particularly perceptive to the special fears, sensitivity and reluctance (to leave home ground or to accept help) that affect older victims of disaster.

- Action Task #13 AAA are required to prepare and submit the form, Status Report/Request for Funds (see Appendix F-pages 52-53) to the California Department of Aging each week until the AAA is no longer an active participant in disaster recovery. [AAA]
- Action Task #14 -- Within 30 calendar days of the end of the declaration, the AAA must submit a final report, including a final <u>Status Report/Request for Funds</u> (see <u>Appendix F-pages 52-53</u>), explanatory narrative and other supporting documents. [AAA]

MSSP providers will summarize any expenditures attributed to the disaster (include administrative, care management, or client waived services related costs) on the quarterly summary report following the disaster. [MSSP]

For a complete list of <u>all 15 CDA</u> Action Tasks from preparedness to the recovery phase, please see Appendix A - Checklist of AAA, ADHC, and MSSP Responsibilities.

Section

Disaster Mitigation

he goal of mitigation is to take actions that reduce the impact of potential disasters (e.g., hazards or accidents). While it is not practical for providers serving older persons to construct a levee along a riverbank to reduce the risk of flooding, other more practical risk reduction measures are available to service providers. Rather than engineering roads and bridges to withstand earthquakes, providers should look to safety measures around the building or facility where staff operates and clients are served.

4: Mitigation

These are actions taken to reduce the risk of hazards and to reduce potential human suffering and property loss. It includes structural (e.g., strapping, bolting, reinforcing) and nonstructural actions (e.g., setting standards) taken pre-disaster.

A. Facility Preparation

The following lists some hazard mitigation measures to reduce the risk of earthquake damage. Anything that can move, fall or break during the shaking of an earthquake is a potential hazard.

- Adequately secure all furniture, appliances, equipment, and freestanding objects (cabinets, bookcases, wall shelves, wall-mounted clocks, etc.) to prevent falling during quake shaking.
- Move heavy items from high to lower shelves in closets and cabinets, (high shelves are shelves above the heads of room occupants).
- Lock the wheels on portable rolling carts for A/V & TV equipment, computers, etc.
- Secure hanging plants to prevent them from swinging free or breaking windows during an earthquake.

- Store chemicals to prevent spillage and ensure adequate ventilation (isolate flammable materials).
- Secure objects around doors so they do not fall and block exits.
- Put electrical equipment on surge protectors. Check to see that electrical cords are in safe condition.
- Check cabinet doors to be sure they can be closed securely.
- Clearly mark both gas and water shut-off valves. Post legible instructions on how to shut off each one.
- Maintain a conveniently located set of tools, including pipe and crescent wrenches, to facilitate prompt gas shut-off.
- Check fire extinguishers and change smoke detectors' batteries (recommend doing every six months).
- Place facility evacuation plans in areas accessible to the public.

Post-Disaster Evaluation

Mitigation also includes actions taken post-disaster, based on recommendations for how to improve preparedness, response and recovery efforts to future disasters. After careful review and evaluation of your response to a disaster, presumably a number of lessons will be learned. Adjusting the Agency Disaster Plan and taking action steps to implement those lessons learned will reduce agency risk in future disasters.

Section

Disaster Funds Management for Area Agencies on Aging

his section covers some of the administrative details of reimbursement and funding for disaster relief services.

A. Availability of Funds

Disaster Assistance Requests for Funds

- To the degree practical, AAAs are expected to utilize existing cash reserves to temporarily cover disaster assistance costs.
- AAAs requesting reimbursement for disaster assistance costs must apply for disaster assistance funds through a separate grant apart from the Title III grant.
- Requests for funds to cover disaster assistance costs must be requested in writing, via a completed <u>Status Report/Request for Funds</u> (see Appendix F pages 52-53).
 The California Department of Aging (CDA) handles requests for disaster assistance funds on a maximum priority basis. AAAs should assume, at a minimum, a oneweek processing period from date of receipt of the Request for Funds by CDA.

Source of Cash Flow

• Funds paid out for disaster assistance purposes come from the AAA current contract balance(s), not from any special reserve account.

Intermixing Requests for Funds

 Requests for disaster assistance funds must not be intermixed with regular requests for funds.

Reimbursement Guarantee

• The provision of funds for disaster assistance <u>does not guarantee</u> that the funds will be covered by later augmentation of the current contract amount.

Disaster Assistance Reimbursement

An AAA intending to apply for reimbursement of disaster assistance expenditures must have completed the contracting process with CDA for such reimbursement. The CDA contract language will specify the types of expenditures to be covered and a maximum allowable amount ("cap") to be reimbursed.

- The "cap" may be raised one or more times, depending on the scope, and duration
 of the disaster, and the availability of funds. An AAA, which incurs obligations
 beyond an existing "cap," does so at its own risk.
- The conditions under which CDA will reimburse an AAA for disaster assistance expenditures are as follows:
 - 1. The AAA must have, prior to the expenditures for which reimbursement is claimed, obtained formal commitment for reimbursement by CDA.
 - 2. The AAA must have, prior to the onset of the disaster or emergency, complied with all provisions of Action Tasks 1 5 in Section 3, CDA Requirements of AAA, ADHC, and MSSP Regarding Disaster Preparedness, of this Handbook (pages 19-20).

For a complete list of <u>all 15</u> required CDA Action Tasks, please refer to <u>Appendix A – Checklist of AAA, ADHC, and MSSP Responsibilities, pages</u> 42-44.

- The AAA must have complied with all provisions of Action Tasks 6 10 in Section 4, CDA Requirements of AAA, ADHC, and MSSP Regarding Disaster Response, of this Handbook (pages 24-25).
- 4. The AAA must have for the period for which reimbursement is claimed, complied with Action Tasks 11 12 in Section 5, CDA Requirements of AAA, ADHC, and MSSP Regarding Disaster Recovery, of this Handbook (page 34-35). This assumes that FEMA has activated its Help Centers, which is necessary if the AAA expects any reimbursement of, or credit for, costs associated with provision of the services relevant to Action Tasks 10, 11 and 12.

Moreover, for the AAA to claim reimbursement for any of the Recovery Services listed in Section 5, pages 27-29, it must provide written confirmation from the FEMA federal coordinating officer that the AAA must act to provide the service in the absence of other resources.

 The AAA must have completed and submitted an approved <u>Final Report</u> (Action Task 14, see page 35) on its disaster assistance activities and expenditures.

B. Match Requirements

<u>Older Americans Act – Administration on Aging Reimbursement</u>

 Older Americans Act funds reimbursable by Administration on Aging (AoA) are derived from Title IV discretionary funding, subject to the AoA Commissioner's practice of imposing no match requirements.

Other Sources

 Match requirements for sources other than Older Americans Act funds must be determined from the funding source at the time the funds are committed.

Use of Disaster Assistance Funds as Match

 Disaster assistance funds from nonfederal sources may be used as match for Title III disaster assistance expenditures only.

C. Nutrition Services Incentive Program (USDA Reimbursement)

Additional meals provided during a disaster are eligible for USDA reimbursement, provided the meals meet Title III standards. (Other meals, including soup/sandwich meals, snacks and beverages, are not USDA reimbursable.) Qualifying disaster assistance meals should be reported in the same manner as all other qualifying meals.

D. Fiscal Accountability

Disaster-related revenues and expenditures must be recorded accurately to ensure an adequate audit trail for disaster assistance related activities. It is not advisable to establish entirely different systems of accountability for disaster assistance finances.

Disaster Assistance Funding Accountability

Funds from distinctly different source categories (e.g., private donations/foundation grants, Title III, Title IV, AoA, FEMA, etc.) may not be co-mingled, and must be separately accounted for.

Disaster Assistance Expenditure Accountability

- All expenditures of Title III funds, whether for disaster assistance or ongoing activities, must be accounted for in the same way, regardless of source (current contract, augmentation from State allotment, redirection, etc.)
- Expenditures of funds from all other sources must be separately accountable by source.
 This distinction is particularly important in terms of match rate, non-match, audit, and reimbursement considerations, especially if the source is governmental.



Appendices

Appendix A: Checklist of AAA, ADHC, and MSSP Responsibilities

Appendix B: Outline for Developing an Agency Disaster Plan

Appendix C: Critical Local Contacts In an Emergency

Appendix D: Site Emergency Resource Summary

Appendix E: Assessment of Disaster Impact on Seniors

Appendix F: Status Report / Request for Funds

Appendix G: Response to Specific Disaster Events

Appendix H: Additional Resource Materials

- Preparedness Tip Sheets for Seniors and People With Disabilities
- Primary Emergency Management Organizations
- Disaster Planning Information for Organizations
- AAA, ADHC, and MSSP Disaster Collaborative Groups

APPENDIX - A

Checklist of AAA, ADHC, and MSSP Responsibilities

Preparedness Phase:

Task #	Task	Agency
1	Designate an Emergency Services Coordinator. The Emergency Services Coordinator takes responsibility within the agency for emergency planning and preparedness activities and oversees the completion of items on this checklist.	AAA ADHC MSSP
2	Complete and keep current an Agency Disaster Plan. Each AAA, ADHC, and MSSP must have a written disaster plan. Use Appendix B as a guide for developing a concise three-to-five page plan. Copies of the plan must be distributed to all staff within the agency. A copy of this plan must also be on file for the California Department of Aging to review during its monitoring visits.	AAA ADHC MSSP
3	Develop a directory of the critical local contacts in an emergency and form working relationships with them, as appropriate, for effective emergency response. Appendix C lists the critical local contacts. Attach this directory to the Agency Disaster Plan above. In addition, establish working relationships and where appropriate letters of agreement or understanding, between the AAA, ADHC, and MSSP and contact organizations on the list. Use agreements to clarify support roles and relationships in meeting the disaster needs for older persons.	AAA ADHC MSSP
4	AAA: Ensure that each contract agency has a written Emergency Operations Plan. [A template for the Plan is available at http://www.preparenow.org/srplan.html]	AAA
	MSSP sites and ADHC must ensure that vendor agreements address requirements for provision of service during emergencies.	ADHC MSSP
5	Inventory resources within the aging network that can be used to support older persons in a disaster. Use the form in <u>Appendix D</u> to survey the emergency resources of programs administered by or under grant, contract, or agreement with the AAA, ADHC, or MSSP.	AAA ADHC MSSP

APPENDIX - A

Checklist of AAA, ADHC, and MSSP Responsibilities (Continued)

Response Phase:

Task		
#	Task	Agency
6	AAA: Assess the impact of the disaster on both seniors and network resources. Determine what sites and/or services are not operational, while also assessing what extra service capacity or resources are available to pool among providers, or to use for service expansion. Make every effort to minimize the period of downtime when sites or services are interrupted.	AAA
	ADHC and MSSP emphasis would be on assessing impact to service providers that your consumers rely upon.	ADHC MSSP
	Note: In all cases, these assessment efforts continue through to the recovery phase.	
7	Contact local (city or county) emergency services coordination personnel at the Emergency Operations Center (EOC). Convey assessment results. Determine, in conjunction with local emergency services personnel, the service priorities to be pursued. Note: As per SEMS, utilize your local EOC or Op Area EOC to request resources based on the assessment above (Task 6). However, resources may be limited the first few days following a major disaster event.	AAA
8	Contact the California Department of Aging's Emergency Services Officer within 24 hours of the onset of disaster. Provide a brief summary of the initial assessment.	AAA ADHC MSSP
9	Submit the form, Assessment of Disaster Impact on Seniors, (see Appendix E) to the California Department of Aging's Emergency Services Officer, within three days of the disaster's onset. Note: This form should be submitted within 24 hours if possible. Yet it is understood that following a major disaster, with limited communication, it may take three days to do a thorough assessment.	AAA ADHC MSSP
10	Brief Information and Assistance/Referral staff, and as appropriate, expand I&A/R services.	AAA

APPENDIX - A

Checklist of AAA, ADHC, and MSSP Responsibilities (Continued)

Recovery Phase:

Task #	Task	Agency
11	If FEMA has activated, assign specific AAA staff or volunteers to the local FEMA Help Center (formerly known as a Disaster Assistance Center or DAC) to serve as "Disaster Advocates" for seniors. MSSP and ADHC providers should ensure that all care managers are provided with specific information that is to be provided to clients.	AAA ADHC MSSP
12	Assign AAA staff or volunteers to do special outreach and/or be an escort for older victims who may not be aware of available assistance or who may feel that seeking such services may be futile for older persons. Note: Individuals performing special outreach or escort should be particularly perceptive to the special fears, sensitivity and reluctance (to leave home ground or to accept help) that affect older victims of disaster.	AAA
13	AAA are required to prepare and submit the form, <u>Status</u> <u>Report/Request for Funds</u> (see <u>Appendix F pages 55-56</u>) to the California Department of Aging each week until the AAA is no longer an active participant in disaster recovery.	AAA
14	Within 30 calendar days of the end of the declaration, the AAA must submit a final report, including a final Status Report/Request for Funds, explanatory narrative and other supporting documents.	AAA
	MSSP providers will summarize any expenditure attributed to the disaster (include administrative, care management, or client waived services related costs) on the quarterly summary report following the disaster.	MSSP

APPENDIX - B

Outline for Developing an Agency Disaster Plan

- 1. The Agency Disaster Plan (presumably a short three-to-five page document) must provide staff and other members of the agency with information on the following. For ADHC, as a direct on site service provider, this plan may be more than five pages to comply with DHS Licensing disaster plan consideration.
- 2. A short statement defining the agency's disaster mission. [Refer to <u>Section 3:</u> <u>Disaster Preparedness</u>, pages 16-20, for more information.]
- 3. A brief summary of the emergency supplies on site and how and when they are to be used. [Refer to <u>Section 3: Disaster Preparedness</u>, pages 16-20, for more information]
- 4. A brief statement describing the plan for communications in an emergency (if regular communication systems are interrupted). This includes an identification of the primary constituents with whom the agency must be in contact with post-disaster. [Refer to Section 3: Disaster Preparedness, pages 16-20, for more information.]
- 5. A brief statement describing the plan for service continuity following a disaster, if normal resources are unavailable or demand exceeds capacity. Indicate any mutual aid or vendor agreements to provide emergency backup for operations or key resources. [Refer to Section 3: Disaster Preparedness, pages 16-20, for more information.]
- 6. An emergency response organization chart that identifies the name of the agency staff person with responsibility for each SEMS function (i.e., Management, Operations, Planning, Logistics and Finance). [Refer to <u>Section 2: Standardized Emergency Management System (SEMS)</u>, pp.9-15, for more information]
- A brief statement of how the agency plans to assess the disaster impact on older persons within its service area. [Refer to <u>Section 4: Disaster Response</u>, pp. 21-25, for more information.]
- 8. A brief statement of how the agency will respond, following a disaster, to the needs of seniors in its Planning and Service Area, or catchment/service area served by the program. [Refer to Section 4: Disaster Response, pp. 21-25, for more information.]
- 9. A brief statement about the role the agency might play in the recovery phase of a disaster and a list of services (if applicable) the agency will provide to ensure the safe recovery of the older persons it serves. [Refer to <u>Section 5: Disaster Recovery</u>, pp. 26-35, for more information.]

APPENDIX - C

Critical Local Contacts In an Emergency

Please complete a separate list of the following local contacts and attach to the Agency Disaster Plan. Include telephone number, location and if appropriate, the name of the contact person and if there is an alternate number to call in an emergency.

Emergency Contacts:

American Red Cross

Note: Establish contact with the Disaster Services Coordinator for the Red Cross chapter that serves your county or region.

2. County Office of Emergency Services (OES)

Note: Area Agencies on Aging that serve multiple counties will need to identify each County OES office in their region.

3. City or Local Office of Emergency Services

Note: Likewise, Area Agencies on Aging that serve multiple cities will need to identify each Emergency Services Coordinator for the cities that the AAA serves. Contact County OES (above) to get a list of the local City Emergency Services Coordinators for that county.

- 4. Fire (nearest Fire Station)
- 5. Hospital (nearest Hospital or Health Facility in an emergency)
- 6. Police (nearest Police Station)

Other Contacts:

7. Amateur Radio (nearest Amateur Radio Group)

Note: Check the Internet for local ARES (Amateur Radio Emergency Services), RACES (Radio Amateur Civil Emergency Service), or other Amateur Radio Associations.

- 8. Community Disaster Preparedness Group (if applicable; e.g., VOAD or CARD)

 Note: Check with your local American Red Cross or County Office of Emergency
 Services to see if there is a local Community Disaster Preparedness Group in your
 area.
- 9. Interfaith Coalition (if applicable)
- 10. Salvation Army

Please include any additional contacts as appropriate for your community.

APPENDIX - D

Site Emergency Resource Summary

The following survey is to help the Area Agency on Aging assess potential resources in the community to support older persons following a large community disaster. Once this survey is completed it should be faxed to the attention of the CDA Emergency Services Officer at (916) 324-1903 and (916) 324-4989.

1.	Given a need for sheltering people (especially older persons) in the community following a major disaster, could your facility provide temporary shelter space for one or two days?
	Yes No Maybe (w/ training & support)
2.	How many people can you accommodate (please check your best estimate)?
	1 - 25 26 - 50 51 -75 76 - 100 101 - 150
3.	In an emergency what resources (or supplemental services) could your organization provide (check all that apply)?
	Counseling Services Temp. Housing Home/Neighborhood Cleanup Site for Food/Water Storage Distribution Emergency Power/Generator Emergency First Aid Volunteers Kitchen/Cooking Facilities Other (please indicate)
4.	Following a major disaster, could your facility help in transporting older persons to disaster services?
	Yes (assuming the resources are not in use) No
ар	If yes, what transportation resources does your organization have (check all that ply)?
	Passenger Sedan(s) Vans (Passenger or Cargo) Trucks (Including Pickups) Vans with Wheelchair Lifts
5.	If needed at disaster service centers, please indicate support that your organization could provide with language translation, including sign language.
	List languages (other than English):

6.	Given the community that your organization serves, would you be able to help in assessing the needs of older persons in that community or neighborhood, following a disaster?
	Yes No Maybe (depending on resources at the time)
	What is the name of the area, neighborhood or community?
<u>Fo</u>	r organizations that provide meal services:
7.	Please indicate the type of meal services that your organization provides (check all that apply)
	Congregate Meals Home-delivered Meals
	Given the resources, could your organization expand meal services following a disaster to meet needs in the community?
	Yes No
Sit	e Information:
Na	me of Site:
Str	reet Address of Site:
Cit	y: Zip:
	e Telephone Number:
Dir	rector Information:
Dir	rector Name:
	Business Phone:
	After Hours or Cell Phone:
	E-mail: Fax:
Sit	e Emergency Coordinator Information:
Sit	e Emergency Coordinator Name:
	Business Phone: After Hours or Cell Phone
	E mail:

APPENDIX - E

Assessment of Disaster Impact on Seniors: Area Agency on Aging

This form must be faxed to the attention of the CDA Emergency Services Officer at (916) 324-4989 within three days of the onset of the disaster. (See Action Task #9)

Note: This form should be submitted with 24 hours if possible. Yet, it is understood that following a major disaster, with limited communication, it may take up to three (3) days to do a thorough assessment.

to do a thorough assessr	nent.	sation, it may take up	to amos (s) days
Name of Agency:		PSA#	
Report Submitted By:			
Report Submitted By:	(Name)	(Title)	
Telephone:		Date:	
E-Mail Address:			
Criteria for reimburseme	nt using Older Americar	Act (OAA) funding:	
supportive services President and those stated in OMB (A-122), These AoA Disfunding after a	eimbursable through thivices (and related supplicarry the same allow at the Code of Federal Reland the Common Rule. saster Relief funds are all other funding sources stance funds as well as	ies) during a disaster pility and accountability egulations (CFR), und evailable as a potention have been exhauste	r declared by the ty requirements as der OMB (A-87y), al source of ed – Federal, State,
Based on the above crite funding?	ria, do you anticipate th	e AAA will require di	saster assistance
Yes/No			
If you have answered "	No" to the above ques	stion, please sign ar	nd return this
form to CDA.			
If you have identified o	r anticipate reimbursa	ble expenditures, a	nswer the
Total amount of	of actual disaster related	l expenditures incurre	ed to date:
 Ongoing and p 	rojected expense until:		

	• T	otal reimbursable proje	ected expenditures:				
1.	. Have you applied for local assistance through any non-profit, local, state or federal disaster relief-funds? Yes/No						
2.	Have you contacted your providers concerning needs they may have due to the disaster? Yes/No						
3.	Specify combination	counties affected and i	ount of disaster assista indicate whether areas This question is design county.)	are urban	i, ruraİ, or a	1	
		Amount Required	County	Urban	Rural		
de	 How has the disaster impacted seniors and adults with disabilities living in the designated PSA? Estimate the number of older persons affected in your PSA. 						
2.	Check and/or list anticipated disaster assistance needs of seniors and adults with disabilities. Expanded I&A/R ServicesExpanded Care ManagementExpanded Legal ServicesExpanded Congregate MealsExpanded Home-Delivered MealsEnded Transportation ServicesExpanded Transportation Services						
		panded In-Home Care	•	oort for FE	MA or One	-Stop	

3.	Describe any special characteristics or circumstances of monitored. For example, low income, minority areas, a how CDA might help, etc. Low income and minority set be monitored. CDA could work with Medi-Cal to ease of time it takes to get a treatment authorization request (T living in the disaster areas could quickly obtain needed	illegations of unfair treatment, niors in these areas should restrictions on the length of AR) approved, so that those
Siç	gnature:	Date:

APPENDIX - F

Status Report / Request for Funds

Date Report Prepared:	
Reporting Period: From:	 To:
Telephone (for follow-up):	
Title or Position:	
Name:	
Area Agency:	PSA#
Report Submitted By	

2. Services Provided By/Through Area Agency This Reporting Period

	# Srs Served	# Times Service Provided	Estimated Cost of Assistance Provided By or Through Area Agency	Area Agency Share of Assistance Costs
A. Expanded I&A Services				
B. Expanded Congregate Meals				
C. Expanded Home-Delivered Meals				
D. Expanded Transportation				
To/From FEMA Help Center				
2. To/From Medical				
To/From Other (specify				
below)				
E. Expanded In-Home Care				
F. Forms Completion Assistance				
G. Expanded Care Management (s/b Care)				
H. Relocation/Moving Assistance (Evac.)				
Assistance with Home Cleanup				
J. Expanded Legal Services				
K. Special Outreach Activities				
L. Support at FEMA Help Centers				
M. Other (Attach Description)	XXX	XXX		
N. Administrative Support	XXX	XXX		
REPORT PERIOD TOTAL				

3.	Reque	est for Funds to Cover	Di	saster Assistance Cos	ts		
	Amou	nt Requested					
4.	Expla	nation of Request					
	ase attach nat below	• •	et t	o indicate how costs we	ere incurre	d based	on the
Da	ate	Cost Item or Type of Disaster Assistance Provided		Purpose of Cost Item	# Older Persons Served		penditure nount
				tation or supporting evident by whom, etc.) to prov			eceipts,
5.	Pleas	e provide a brief asses	sm	nent of the need for the	e service/a	ıssistan	ce.
6.	Pleas	e indicate the areas or	со	ommunities receiving th	ne service/	/assista	nce.
7.	Efforts	s to Obtain Support Fro	om	Other Sources			
	rfaith Reli	, ,		mergency Operations C uch as United Way drive	•		
	Potential	Source		Response or Result			
8.	Other	Organizations Entitled	l to	Funds from this Adva	nce or Re	imburse	ment
	Organiza	ation	S	ervices Provided		Amount	
							-

APPENDIX - G

Response to Specific Disaster Events

Preparing for Acts of Terrorism and How to Shelter in Place

The new U.S. Department of Homeland Security advises us to recognize the threat of terrorism and the impact from weapons of mass destruction as we plan for disasters. Many of the steps required in preparing for a terrorist attack or man-made emergency are the same as preparing for a natural emergency.

The primary difference is that in reaction to a specific terrorist attack, such as a biological or chemical attack, or nuclear or radiation attack, local officials may advise all residents within the affected area to shelter in place. This means taking refuge inside your home or office, or any place that will afford you protection from a contaminant in the air. To maximize protection and create the best barrier from any contamination, plan to do the following when instructed to shelter-in-place.

- Close all windows
- Turn off fans, heating and air conditioning systems; close the fireplace damper.
- Listen to the radio and remain where you are until local authorities tell you it is safe to go outside

The American Red Cross has complete instructions on how to shelter-in-place:

http://www.redcross.org/services/disaster/beprepared/shelterinplace.html.

In addition Ready.gov, a web site set up by the new U.S. Department of Homeland Security, provides more detail about response to specific man-made disaster threats (see below).

http://www.readv.gov/get_informed.html.

Response to Natural Disasters

The American Red Cross has numerous Community Disaster Education materials that provide details on individual response to specific disaster events, such as actions to take during a fire, earthquake, heat wave, flood, winter storm, etc. Go to the Disaster Services Publications: Community Disaster Education Materials Listed by Hazard at the web address below.

http://www.redcross.org/pubs/dspubs/cdelist.html

APPENDIX - H

Additional Resource Materials

Preparedness Tip Sheets for Seniors and People With Disabilities

1. Administration on Aging

Website Address:

http://www.aoa.gov/prof/aoaprog/disasterassist/disasterassistmanualx.asp. Disaster Assistance Resources for Older Persons and their Families.

2. CDA & OES Emergency Preparedness for Seniors and People with Disabilities

Website Address: http://www.aging.ca.gov

The California Department of Aging (CDA), in collaboration with the State Office of Emergency Services (OES) produced an emergency preparedness tip sheet for seniors and adults with disabilities (translations include Spanish, Chinese, and Russian).

3. Earthquake Tips for People with Disabilities, written by June Kailes

Website Address: http://www.jik.com/disaster.html
Although these "Tip Sheets" focus on earthquake safety, they apply to general disasters for people with disabilities. What is most valuable is the specificity of the information for people with specific disabilities.

4. Disaster Preparedness for People with Disabilities

Website Address:

http://www.redcross.org/services/disaster/beprepared/disability.html

Anyone who has a disability or anyone who works with, lives with, or assists a person with a disability can use this booklet. It contains information that can help you organize a personal disaster plan.

Primary Emergency Management Organizations

1. American Red Cross (ARC)

Website Address: http://www.redcross.org and http://www.prepare.org. Site contains numerous publications and resource materials.

2. California Governor's Office of Emergency Services

Website Address:

http://www.oes.ca.gov/Operational/OESHome.nsf/LevelTwoWithNav?OpenForm&Key=Disaster+Assistance. This is the official website for the State Office of

Emergency Services. It provides updates on the State's level of emergency readiness, in addition to materials on disaster preparedness and links to related sites.

3. Community Preparedness Website: Supporting Special Needs and Vulnerable Populations in a Disaster

Website Address:

http://www.PrepareNow.org http://www.preparenow.org/contact.html

This website has disaster preparedness materials in multiple languages for seniors and people with disabilities. The purpose of the site is to raise awareness of the needs and concerns of vulnerable populations in disasters. It also contains general links on disasters and special needs.

4. County OES (Office of Emergency Services)

Website Address: http://www.oes.ca.gov. Each county has an OES office. The county OES office will provide extensive guidance on disaster preparedness and response activities. To find contact information for the office in your area go to the web address above (select About OES, then select OES Contact List, then select OES Divisions and Regions, then select Related Agencies and finally select County Offices of Emergency Services Addresses).

5. Federal Emergency Management Agency (FEMA)

Website Address: http://www.fema.gov. For all publications, contact the FEMA Distribution Center toll-free at (800) 480-2520 or order on line at http://www.fema.gov/library

Disaster Planning Information for Organizations

1. Agency Emergency Plan - A Simplified Version for Community-Based Organizations

Website Address: http://www.preparenow.org/srplan.html
This template or sample emergency plan is designed specifically to help organizations serving seniors develop their own disaster plan.

2. Emergency Preparedness Manual for The Aging Network, Commissioned by The U.S. Administration on Aging, March 1995

Website address:

http://www.aoa.gov/prof/aoaprog/disasterassist/disasterassistmanualx.asp
A disaster guide for State Units on Aging and Area Agencies on Aging. The guide provides technical assistance to assure the continuing development of the aging network's capacity to serve older disaster victims.

3. Guide on the Special Needs of People with Disabilities, for Emergency Managers, Planners and Responders

Website Address: http://www.nod.org/pdffiles/epi2002.pdf . Information about meeting the needs of people with disabilities in times of disaster.

Community-Based Organizations (CBO) Disaster Collaborative Groups

A CBO Disaster Collaborative Group is a generic term that refers to diverse groups of CBO that come together to prepare and develop a coordinated response to vulnerable populations in disasters. The most common CBO Disaster Collaborative is known nationally as VOAD (Voluntary Organizations Active in Disasters). Some VOAD groups have formed locally throughout California. National VOAD has a website at http://www.nvoad.org/

There are three models of Disaster Collaborative Groups:

- 1. Community Collaborative Groups (CCG) in the SF Bay Area focus on addressing special needs populations following a disaster. These groups emerged based on lessons learned from the 1989 Loma Prieta earthquake and the 1991 Oakland Hills firestorm as well as other local disasters. For program and contact information on local Bay Area CCG, go to http://www.preparenow.org/bacol.html
- 2. Emergency Network Los Angeles, Inc (ENLA) ENLA developed out of the Los Angeles Mayor's Office following the 1994 Northridge Quake and shortly thereafter merged with the existing Los Angeles County VOAD. Its mission is to enhance preparedness and coordinated response to disasters by facilitating linkages among Los Angeles County Community-Based Organizations and with Government and the Private Sector. Go to http://www.enla.org.
- 3. Bay Area Emergency Preparedness Coalition for Seniors and People with Disabilities A collaboration between Area Agencies on Aging and Centers for Independent Living in Alameda, Contra Costa, Marin, San Francisco, and San Mateo Counties. The focus is to (1) strengthen the ability of senior and disability organizations to meet the challenges of a disaster and (2) build the capacity of Bay Area communities to respond to the special needs of older and disabled adults in disasters. Go to http://www.preparenow.org/bacol.html.